

THE SECOND LOOK COMMISSION

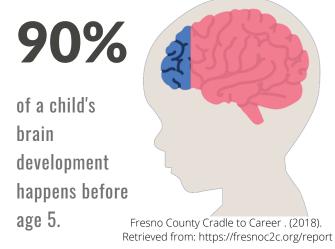
The SLC reviews some of the worst incidents of recurring child abuse and neglect in Tennessee. The SLC reviews cases of children from across Tennessee who have experienced a second or subsequent incidence of severe abuse to identify ways to improve the system and help other children avoid a similar fate. The SLC publishes an annual report of their findings. This document outlines key information primarily contained in the 2021 annual report. Additional information is available in the 2021 annual report.

Included Highlights

- Impact of Child Abuse
- Data
- Findings
- Recommendations
- Observations
- Comparing 2019 and 2020

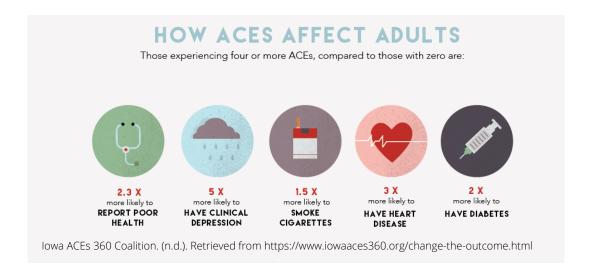
Impact of Child Abuse

Childhood is a crucial time for brain development. In the first few years of a child's life there are more than one million new neural connections forming each second. Every second counts, and every second a child is enduring severe abuse is drastically impacting the long-term health and development of both the child and their community.



Adverse Childhood Experiences

Tennessee's continued prosperity requires that we support healthy child development. The link between adverse childhood experiences (ACEs), and a broad range of negative outcomes is well documented. Data accumulated over the past two decades provides strong evidence that toxic stress and early childhood adversities can derail optimal health and development. Moreover, the resulting financial toll is estimated to cost hundreds of billions of dollars every year.



These adversities often build upon one another producing a cascade of issues which ultimately place the next generation at risk. With thoughtful reflection and strategic planning, it is possible to break this devastating cycle of trauma and provide the necessary supports to families across the state. Each child in Tennessee deserves to live in a safe, stable, supportive, and nurturing environment. Holding that ideal in mind, child abuse prevention stakeholders must acknowledge the severity of the present situation to take meaningful steps towards alleviating the burden on children and their families.

Impact of the Pandemic

The coronavirus pandemic continues to serve as a major source of stress for all families as it jeopardizes our health, safety, and economic well-being.

- Increased caregiver stress is known to be associated with increases in child maltreatment. Available data shows that rates of anxiety and depression in adult Tennesseans reached peak levels in June 2020 and January 2021. Nationwide, symptoms of anxiety and depression more than tripled from pre-pandemic levels. These symptoms were especially common among parents, children attending virtual school and their parents, and family caregivers. Boundaries between occupational and familial responsibilities have blurred and the responsibilities weigh on caregivers more than ever.
- Physical distancing measures, although vital to prevent community spread, detach
 overwhelmed families from important supports and resources. Humans rely on
 relationships to thrive; as such, decreased health and well-being is an inherent
 consequence of social isolation. This is particularly true when a caregiver lacks childcare
 support. Studies show that continual close contact under stress is associated with an
 increased risk in aggressive behaviors and violence.
- When schools are closed, youth are unable to receive critical physical, emotional, behavioral, nutritional, and educational services. This disproportionately impacts economically disadvantaged children, who are already at a higher risk of ACEs.
- "Safer at home" initiatives are effective at reducing risk of infection with COVID, but for families where domestic violence is a concern, it is important to weigh the risk of abuse against the risk of infection. Moreover, many children are not encountering the individuals central to identifying child abuse (i.e., teachers, healthcare workers) as consistently; consequently, incidents of abuse are potentially going unnoticed.

In a study looking at the rates of abuse and neglect before and after pandemic-related school closures, Salt et al. (2021), documented an 85% increase in incidents of both child sexual abuse and abuse requiring an inpatient encounter.

Supporting children, particularly those serving as the basis of this report who have already endured substantial hardships, should be uncontroversial. They deserve to live fulfilling and productive lives. This can be realized by working together on three evidence-based principles:

- 1) support nurturing relationships,
- 2) reduce external sources of stress on families, and
- 3) strengthening core life skills in children and their caregivers.

2019-2020 CASE DATA

Department of Children's Services reported 626 children experienced a second or subsequent incident of severe child abuse in FY 2020.





resulting from cases
of second or
subsequent severe
abuse

626

cases of second or subsequent severe abuse



For FY 2020:

20%

0%

80%

Drug Exposed Child Lack of Supervision Physical Abuse Other Maltreatment Sexual Abuse

This chart is solely based on the second or subsequent incident of severe child abuse. The most prevalent type of child abuse, including the first and second incidents, on the FY 2020 list of cases was Drug Exposed Child/Infant.

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Reported cases in FY 2020 by county



Findings

- There remains opportunities to pursue services for caregivers and children more aggressively.
 - Additional resources are needed for pre-teen youth dealing with substance abuse issues.
 - Witnessing abuse and neglect is traumatic. The trauma needs to be addressed regardless of whether the child is the alleged victim.
- There is a need to provide greater effort to place children in foster homes that can appropriately meet their needs.
 - SLC members question whether family placements were properly scrutinized prior to placement, and whether they received the appropriate support after placement.
- Non-family members who have been substantiated for child abuse or neglect should not have access to other non-biological children unless appropriate protective measures are put in place.
- When a protective order is entered, child abuse prevention stakeholders need explicit
 follow-up procedures to ensure parties are complying with the order or determine
 whether the order has been terminated. Additionally, violations of the orders need to be
 reported to the proper individuals.

Recommendations

- Safety and stability need to be prioritized when placing children.
- In line with best-practice, child abuse prevention stakeholders should utilize community resources to connect relative caregivers and foster caregivers with adequate supports. Additional training and other resources need to be available for relative placements.
- Before determining a drug test is a true or false positive, confirmatory, or alternative drug testing should occur. Additionally, child abuse prevention stakeholders should consider whether confirmatory testing is necessary if there is a drug test that impacts custody or safety of a child.
- The General Assembly and the Administration need to make funding for resident training opportunities aimed at expanding and improving medical and behavioral health services to medically underserved areas and rural counties recurring and substantial.
 - PC0587, codified in TCA 49-9-703(e), creates additional resident training opportunities focusing on family medicine, general pediatrics, primary care medicine pediatrics, and psychiatry to provide medical and behavioral health services in medically underserved areas and rural counties, distributed across all three (3) grand divisions of this state. The recurring funding should not be less than \$4,000,000, and should increase based on identified needs of children and youth for medical and behavioral health services in medically underserved areas and rural counties. Services to children and youth who have been severely abused must be a priority.

Observations & Recommendations

Observation: A leasing agent refused to provide address information about a family being investigated by DCS.

Recommendation: This observation presents an opportunity to train and teach DCS employees as well as those who refuse to provide necessary information to DCS. In partnership with DCS legal, the Office of Child Safety should consider providing training to help DCS staff better understand their options when they are met with opposition to providing information to help locate a potentially abused or neglected child.

Observation: There is opportunity to provide law enforcement with additional training to help them identify and respond to child abuse cases.

Recommendation: Tennessee law requires the Jerry F. Agee Tennessee Law Enforcement Academy, the Tennessee peace officer standards and training commission, and DCS to "work together in developing ways to inform and instruct appropriate local law enforcement personnel in the detection of child sexual abuse and in the proper action that should be taken in a suspected case of child sexual abuse." The additional training can be incorporated into existing training provided to law enforcement.

Observation: The use of extension of foster care could help provide much needed services to abused and neglected children aging out of custody.

Recommendation: DCS should expand eligibility criteria for Extension of Foster Care under the Federal Fostering Connections legislation to include young adults participating in a program or activity designed to promote, or remove barriers to, employment; and young adults employed for at least 80 hours per month.

Observation: Engaging fathers is an opportunity for improvement. In some cases, fathers can provide additional safety placement or permanency options. The SLC made a similar finding in 2017 and 2019.

Observation: CASA provides an invaluable service in dependent and neglect cases, and should be appointed when available, as early as possible.

Observation: Sometimes there is a substantial period between the entry of a permanency plan and the adjudication in child abuse and neglect cases, particularly severe abuse cases.

Observation: When a child's nondisclosure appears to be inconsistent with other evidence, consideration to the child's relationships and what they say should be considered when determining additional investigative actions. Disclosures and nondisclosures are a piece of the body of evidence that must be considered; they are not determinative.

Observation: There were opportunities for higher levels of intervention earlier in the cases.

Observation: All decision makers should provide clear rationale for removing one child from a home and leaving other children in the same home.

Observation: The Department of Children's Service (DCS) continues to improve its case management and documentation.

Child Protective Investigation Teams (CPIT)

Observations and Recommendations

Observation: Tennessee should consider restructuring CPITs to appropriately include medical professionals. Child abuse cases, particularly severe child abuse cases, often involve complex investigations, responses and prosecution.

Recommendation: TCA 37-1-607(a)(2) should be amended to include properly trained medical professionals as permissive members of CPIT. In many cases, a professional medical examination and conclusion regarding the mechanism and extent of injuries are critical. Careful consideration must be given when determining which medical professionals join CPIT.

Observation: There was concern regarding failure to bring a child with injuries for an evaluation by a medical professional.

Recommendation: Tennessee needs to invest in the medical evaluation of children who are believed to be abused and neglected to make sure every child receives necessary and appropriate medical care. To implement this recommendation,

Tennessee needs additional medical professionals trained in the field of child abuse.

The Child Protective Investigation
Team (CPIT) serves as the statutorily
mandated Multi-Disciplinary Team
(MDT) in Tennessee. DCS uses the the
MDT approach during investigations of
severe child abuse to ensure completion
of a strategic and thorough
investigation, as well as providing child
victims with the needed supports to
ensure their safety.

Recommendation: Child abuse prevention stakeholders should work to determine the cause of injuries to a child when there is physical evidence and other indications of abuse, regardless of whether the child discloses abuse. Such efforts could include a forensic interview at a child advocacy center. Tennessee should consider the feasibility and utility of developing a list of injuries that would mandate a child be examined by a medical professional.

Recommendation: Tennessee needs legislation that provides a clearer definition of the type of abuse that must be considered by the child protective teams defined in TCA 37-1-607, also known as Child Protective Investigation Teams (CPIT). TCA 37-1-607(b)(1) states DCS shall convene CPIT when a report of child sexual abuse has been received. TCA 37-1-602 goes into explicit detail regarding what constitutes child sexual abuse.

TCA 37-1-607 does not specifically mandate CPIT review severe child abuse cases, although this is the prevailing practice. It is implied in TCA 37-1-607(a)(1)(A)(i), that CPITs are expected to review severe child abuse cases because collecting data on the number of reports received for investigation by type of abuse is mandated and "serious physical abuse" and "life-threatening neglect" are provided as examples.

TCA 37-1-601 et seq. does not provide substantive guidance regarding what constitutes serious physical abuse and life-threatening neglect. The vague implications and lack of guidance contribute to confusion within CPITs and child advocacy centers regarding which severe child abuse cases require CPIT reviews and forensic interviews.

TCA 37-1-102(b)(27) and TCA 39-15-402(c) may provide guidance for developing a more explicit definition for severe child abuse as it relates to TCA 37-1-601 et seg.

TCA 37-1-607 should clearly state CPIT must be convened for all severe child abuse investigations.

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COMPARING 2019 TO 2020

The FY2020 data disrupts the declining trend of children who have experienced a second or subsequent incident of severe abuse seen in the FY2016 – FY2019 data.

106

ADDITIONAL CHILDREN SUFFERED A SECOND OR SUBSEQUENT INCIDENT OF SEVERE CHILD ABUSE

Drug Exposed Child as the second incident of severe child abuse decreased 36.6 percent and Drug Exposed Child as the first incident of severe abuse decreased 9.3 percent.

Approximately

130

additional instances of **sexual abuse** occurred as the second or subsequent incident of severe child abuse

Approximately

19

additional instances of **physical abuse** occurred as the second or subsequent incident of severe child abuse

CONCLUSION

Tennessee must continue to address all forms of child and use data to focus its efforts. The FY2020 data shows an increase from previous years. However, it is too early to determine whether the FY2020 data is the beginning of a trend in the wrong direction or a one-year deviation. The SLC will continue analyze the data over time to help Tennessee focus its resources in areas of greatest needs. The SLC is committed to helping improve the many systems that impact how Tennessee handles severe child abuse.